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Under the Paper <u>work Reduction Act of 1995, no persons are required</u>	U.S. Patent and to respond to a collection	Trademark Office; U.S.	PTO/SB/22 (12-04) rough 7/31/2006. OMB 0651-0031 DEPARTMENT OF COMMERCE displays a valid OMB control number
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	
FY 2005		544112000200	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Filed	April 46, 0004
Application Number 10/825,911		Filed	April 16, 2004
For METHODS FOR PRODUCTION OF RECOMBINANT UROKINASE			
Art Unit 1652		Examiner	I. Chowdhury -
This is a request under the provisions of 37 CFR 1.135(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	Fee	Small Entity Fe	20
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
X Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 225.00
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
Four months (37 CFR 1.17(a)(4))	\$1590	\$ 795	\$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	
Applicant claims small entity status. See 37 CFR 1.27.			
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 Have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.			
l am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
attorney or agent of record. Registration Number			
x attorney or agent under 37 CF	R 1,34.		
Registration number if acting ur	nder 37 CFR 1.34	52,395	•
_ Sur ~		Octo	ober 11, 2005
Signature		Date	
Jie Zhou Typed or printed name		(650) 813-5922 Telephone Number	
NOTE: Signstures of all the twentiers or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one alignsture is required, see below.			
X Total of 1 forms are submit	ued.		

10/13/2005 MBINAS 00000009 031952

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